GOVERNMENT OF INDIA
WOMEN AND CHILD DEVELOPMENT
LOK SABHA

UNSTARRED QUESTION NO:1106
ANSWERED ON:05.08.2011
ICDS SCHEME
Dashmunsi Deepa ;Joshi Shri Pralhad Venkatesh;Mahato Shri Narahari;Roy Shri Nripendra Nath

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether the Integrated Child Development Services(ICDS) Scheme has been implemented throughout the country including tribal/ rural /urban/ backward regions;

(b) if so, the details thereof;

(c) the growth in the enrollment rate of the ICDS during each of the last three years and the current year, State-wise;

(d) whether the current initiatives of the Government are adequate to meet its target as assigned in the United Nation's Millennium Summit of halving malnutrition among children by 2015; and

(e) if not, the steps taken by the Government to expand the coverage of ICDS Scheme?

Answer

MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT(SHRIMITI KRISHNA TIRATH)

(a) to (e) : With a view to universalize ICDS in the context of revised population norms of Anganwadi Centres (AWCs) and mini-AWCs, the Government made a demand assessment in 2007 by undertaking a micro-level survey through the States/ UTs in the country. Consequent to this, Government approved total of 7076 ICDS Projects and 14 lakh Anganwadi Centres (AWCs)/ mini-AWCs including 20,000 AWCs − on − demand. So far 13.67 lakh AWCs/ Mini- AWCs have been sanctioned by Government of India against which 12.62 lakh AWCs/ Mini-AWCs have been made operational across the country as on 31st March, 2011.

ICDS is a self selecting Scheme. The State- wise growth in the number of beneficiaries namely Children (6 months to 6 years) and pregnant & lactating mothers under ICDS during the last three years and current year is given in the Statement annexed.

The problem of malnutrition is complex, multi-dimensional and inter-generational in nature, the determinants of which include household food insecurity, illiteracy and lack of awareness especially in women, access to health services, availability of safe drinking water, sanitation and proper environmental conditions and adequate purchasing power etc.

Under the Integrated Child Development Services (ICDS) Scheme, supplementary nutrition is provided to bridge the gap between the Recommended Dietary Allowance and the Actual Dietary Intake. Children under six years are provided with 500 k.calories and 12-15 g proteins while severely underweight children are given 800 k. calories and 20-25g of protein in the form of Take Home Ration and /or morning snack and hot cooked meal. Besides the supplementary nutrition, the other services under ICDS include pre-school non-formal education, nutrition & health education, immunization, health check-up and referral services for women and children. Three of the services namely immunization, health check-up and referral services are delivered through the public health system of Ministry of Health & Family Welfare.

Besides, the ICDS programme, the Government is implementing several schemes/ programmes of different Ministries/Departments through State Governments/UTs which impact directly or indirectly on the nutritional status. These schemes, include National Rural Health Mission (NRHM), Mid Day Meals Scheme, Drinking Water & Total Sanitation Campaign, Swarnjayanti Gram Swarozgar Yojana (SGSY), Mahatma Gandhi National Rural Employment Guarantee Scheme (MNREGS), Targeted Public Distribution System (TPDS) etc. The recently introduced Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG), namely SABLA would provide a package of services including health and nutrition to adolescent girls in the age group of 11-14 years for out of school girls and 15-18 years for all girls for nutrition in 200 districts as a pilot. Another new scheme, the Indira Gandhi Matritva Sahyog Yojana (IGMSY) − The CMB Scheme would provide a better enabling environment for improved health and nutrition to pregnant and lactating mothers and support for providing early & exclusive breastfeeding for the first six months of life on pilot basis in 52 districts initially.

The State Governments and UT Administrations have a crucial role to play in addressing the nutrition challenges as they implement most of these multi-sectoral nutrition related programmes. The States/UTs have been requested to expedite the setting up of the State Nutrition Council under the chairmanship of the Chief Minister. This will be an Inter-Departmental Coordinating Committee at the apex level. The States/UTs have been asked to constitute District Co-ordination Committees and District Nutrition Councils for developing State and District Plan of Action on Nutrition.

Nutrition has been receiving priority attention of the Government. Several of the above mentioned schemes have become universal in

recent years. They have the potential to together improve the nutrition status and contribute towards achieving the Millennium Development Goals.